KOLAR Document ID: 1580238

				WWC-5		vision of Wat			Well ID		
	Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction				Resources App. No Section Number			Townshin Numh		aa Numbar	
		Section NumberTownship NumberRange NumberTSR \Box E \Box W									
County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First: First:						Street or Rural Address where well is located (if unknown, distance and					
Business:	direction from nearest town or intersection): If at owner's address, check here:										
Address:	direction from hearest town of intersection). If at owner's address, check here.										
Address:											
City:			State:	ZIP:							
3 LOCAT	E WELL			APLETED WELL: .	£	5 T . 44	4				
WITH "	X" IN										
	SECTION BOX: Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) \Box					8					
1	N					Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:					
		WELL'S STATIC WATER LEVEL: ft below land surface, measured on (mo-day-yr)					GPS (unit make/model:) (WAAS enabled? □ Yes □ No)				
NW	NE	above land surface, measured on (mo-day-yr)									
				vater was f		□ Land Survey □ Topographic Map			(0)		
w	Ε	after		s pumping		Online Mapper:					
CW			Well water was ft								
SW	SE		after hours pumping g			6 Elevation: ft Cround Level TOC					
		Estimated Yield:gpm				6 Elevation:ft. □ Ground Level □ To Source: □ Land Survey □ GPS □ Topographic M					
	S	Bore Hole Diameter: in. to				\square					
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 											
1. Domestic:											
	☐ Household 6. ☐ Dewatering: how ☐ Lawn & Garden 7. ☐ Aquifer Recharge							Uncased [] (
	□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. □ Monitoring: well ID										
2. 🗌 Irrigati	£						12. Geothermal: how many bores?a) Closed Loop ☐ Horizontal ☐ Vertical				
3. Feedlo	E						b) Open Loop \Box Surface Discharge \Box Inj. of Water				
	4. Industrial Recovery Injection						13. Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:											
Water well disinfected? Ves No											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter in. to ft., Diameter in. to ft., Diameter ft.											
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
$\Box \text{ Steel} \qquad \Box \text{ Steinless Steel} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots \dots$											
□ Brass □ Galvanized Steel □ None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. to ft. to ft.											
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Interv	als: From	ft. to		ft., From	ft. to	ft., From	n	ft. to	ft.		
Nearest sou	rce of possible			potential source of con	tamination wi	thin 200 ft.					
□ Septic			Lateral Line			Livestock P			cide Storage		
Sewer 1			Cess Pool	🗌 Sewage La		Fuel Storage			oned Water		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)											
								۵.			
				Distance from w						CDITEDNALC	
10 FROM	TO	1	ITHOLO	GIU LUG	FROM	TO	LITH	O. LOG (cont.) or	PLUGGIN	GINTERVALS	
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	Notes:										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged											
	KAUTUK'S	UK LAND	JWNER'	S CERTIFICATION	N: 1 his wate	r well was	in trans	structed, \square reco	nstructed,	or \square plugged	
Kansas Wo	urisulction an	tractor's Lie	eled on (n	no-day-year) This Wa	ter Wall Day	uns record	is true	d on (mo day w	y KIIOWIEd	ge and benet.	
under the h	usiness name	e of		····· 1 IIIS W 2		Join was CO	mpieteo	u on (mo-uay-y	oar)		
		Send one copy to	WATER W	ELL OWNER and retain	one for your rec	ords. Fee of \$	\$5.00 for (each constructed we	 11.		
KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.											
Visit us at h	ttp://www.kdhel	ks.gov/waterwel	l/index.html						KS	SA 82a-1212	